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1. CORRESPONDENCE ADDRESS	18N2/0106 <b>RECEIVED</b> Publishing Division <b>APR 08 1998</b> <b>11</b>
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2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
INVENTOR'S NAME	
Street Address	
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CO-INVENTOR'S NAME	
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<input type="checkbox"/> Check if additional changes are enclosed	

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/419,824	04/11/95	006	DELANEY, F 1811	01/06/98
First Named Applicant COCHRANE,		CHARLES G.		

TITLE OF INVENTION: PULMONARY SURFACTANT PROTEINS AND RELATED POLYPEPTIDES

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1 TSRI-147.200	514-013.000	W12	UTILITY	NO	\$1320.00	04/06/98

3. Correspondence address change (Complete only if there is a change)

04/14/1998 SHARRELL 00000060 08419824  
01 FC:142 1320.00 OP

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

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5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE: The Scripps Research Institute
(2) ADDRESS: (CITY & STATE OR COUNTRY) La Jolla, California

A. ☐ This application is NOT assigned.  
☒ Assignment previously submitted to the Patent and Trademark Office.  
☐ Assignment is being submitted under separate cover. Assignment should be directed to Box ASSIGNMENTS.  
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6a. The following fees are enclosed: <input checked="" type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies _____	
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The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above. (Authorized Signature) <i>Talivaldis Cepuritis</i> (Date) 04/06/98 NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.	

## Certificate of Mailing

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Box ISSUE FEE  
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on: April 6, 1998 (Date)  
Pamela S. Zwier (Name of person making deposit)  
*Pamela S. Zwier* (Signature)  
April 6, 1998 (Date)